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CONFIRMATION NO. 6158

Bib Data Sheet

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|---|---|----------------------------|---|---------------------------------|
| SERIAL NUMBER 10/694,948 | FILING DATE 10/29/2003 RULE | CLASS 033 | GROUP ART UNIT 2859 | ATTORNEY DOCKET NO. 376.0003 |
| APPLICANTS Robert Dalrymple, Baltimore, MD; ** CONTINUING DATA ***** This application is a CON of 29/180,690 04/30/2003 PAT D,496,596 ** FOREIGN APPLICATIONS ***** NONE IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 01/30/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials | STATE OR COUNTRY MD | SHEETS DRAWING 8 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 3 |
| ADDRESS 25534 CAHN & SAMUELS LLP 2000 P STREET NW SUITE 200 WASHINGTON, DC 20036 | | | | |
| TITLE METHOD AND APPARATUS FOR MEASURING A INTRACORPORAL PASSAGE IMAGE | | | | |
| FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |